Suffolk & North East Essex
DIGITAL STRATEGY &
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NHS
Suffolk and
North East Essex
Integrated Care Board

EVALUATION OF NOBI SMART LAMPS IN SUFFOLK CARE HOMES

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Executive Summary

This evaluation examines the implementation and impact of Nobi Smart Lamps across a cohort of Suffolk care homes as part of the Suffolk and North East Essex Integrated Care Board (SNEE ICB) Digitising Social Care Programme. Nobi Smart Lamps are AI-enabled, ceiling mounted lights that discreetly detect and help prevent falls, automatically alerting carers if someone needs help. The project aimed to improve resident safety, reduce hospital admissions, and enhance staff and family confidence by deploying innovative technology to support older adults and those with complex needs.

Project Overview

- **Scope:** 87 rooms across seven care homes, including one assisted living setting, were equipped with Nobi Smart Lamps. Funding covers three years with providers committed to continued use throughout a fourth year.
- **Technology:** Nobi Smart Lamps replace standard ceiling lights in resident rooms and en-suites, or in a communal bathroom. Using AI and visual sensors to detect falls and other movements such as bed-exit, provide real time alerts to staff, and offer anonymised stick-figure footage for incident review. The system is designed with privacy by default: footage is only retained when a fall or event occurs, and always under provider control.
- **Implementation:** The project was delivered in partnership with Porters Care (Nobi's UK distributor), Suffolk County Council and participating providers. Staff training, baseline data collection, and ongoing monitoring were integral to the rollout.

Methodology

A mixed methods approach combined quantitative data (falls, hospital visits, ambulance call outs) with qualitative insights (staff, resident, and family feedback, observational visits and case studies). Baseline and post implementation data were compared to assess changes in safety, care quality and operational efficiency.

Key Findings

- **Falls Detection :** While the total number of recorded falls increased in some homes, this was attributed to improved detection of previously unwitnessed or minor incidents, rather than an actual rise in risk. Staff reported greater clarity in distinguishing genuine falls from controlled descents, reducing unnecessary safeguarding alerts and ambulance call outs.
- **Hospital and Ambulance Use:** Across all sites, there was a substantial reduction in hospital visits (up to 75%), hospital admissions (up to 100%) in some homes, and ambulance callouts (up to 65%), indicating safer on-site management and more appropriate escalation.
- **Staff Experience:** Staff confidence, workflow efficiency, and professional standards improved. Real-time alerts and clear evidence supported better decision making, reduced time spent investigating incidents, and enhanced communication with families and regulators.

- **Resident and Family Impact:** Families reported increased reassurance and trust in care quality. Residents benefited from faster response times, improved safety, and less intrusive night-time checks.
- **Operational and Economic Benefits:** The project delivered an estimated £89,000 in avoided emergency care costs over six months, with a projected return on investment of 196% over three years.
- **Governance and Learning:** Transparent consent processes, data protection, and ongoing staff training were critical to successful adoption. Cross-provider learning and supplier partnerships were identified as key enablers for sustainability.

Challenges

- Technical issues such as Wi-Fi connectivity and alert pathways required early troubleshooting.
- Integration with existing digital care record systems remains limited, creating some duplication of effort.
- Data on the types of falls and direct resident/family testimony was incomplete in some cases.

Recommendations

- Prioritise digital solutions that reduce operational burden and automate risk monitoring
- Move towards a self-sustaining adoption model, with peer learning and supplier-led support
- Embed smart monitoring technology into standard commissioning and quality frameworks
- Expand use of predictive analytics for broader care improvements, including early detection of health issues beyond falls.
- Align future funding with national digitisation priorities

Conclusion:

The Nobi Smart Lamp project demonstrates clear benefits in safety, efficiency, and reassurance for residents, staff, and families in Suffolk care homes. The evaluation supports wider adoption of smart monitoring as a standard in care settings, provided that robust governance, ongoing training and cross-provider collaboration are maintained.

Acknowledgements

Whilst this was Suffolk and North East Essex ICB led project, I would like to acknowledge the support, help and practical engagement from our partners in this work:

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1. Introduction

The Nobi Smart Lamp Project forms part of the wider Digitising Social Care programme within the Suffolk and North East Essex Integrated Care Board (SNEE ICB). This initiative supports care providers across the region to adopt technologies that improve safety, quality, and outcomes for people drawing on care. Within this context, the Nobi project directly contributes to the Age Well domain and agenda, one of SNEE ICB's key population health priorities.

For the purposes of this evaluation, a fall is defined as an event in which a person unintentionally comes to rest on the ground, floor, or a lower level, with or without injury. This excludes purposeful or controlled descents but includes unwitnessed events where a person is found on the floor.

Falls remain one of the leading causes of hospital admissions among older adults, with many incidents occurring unwitnessed, particularly at night. The project aimed to explore how innovative, AI-enabled monitoring solutions could reduce the frequency and severity of falls, enhance staff response times, and provide families with greater reassurance.

An example is the case where even with 15 minute observations in place for a resident who was a known frequent faller, staff were unable to prevent or immediately detect a fall that resulted in a fractured hip. The Nobi Lamp raised the alert that staff could not have caught through routine checks alone, underscoring the importance of real-time monitoring in preventing avoidable harm.

Nobi Smart Lamps are ceiling mounted, AI-enabled devices designed to improve night-time safety, falls detection and monitoring in care home environments. They replace a standard ceiling light fitting and combine discreet optical sensing with intelligent software to detect risks quickly and accurately, while maintaining resident dignity and privacy.

Nobi uses a privacy-preserving visual sensor to understand body position, movement and changes in posture. The system converts what it sees into stick-figure imaging rather than identifiable images of the person. This allows staff to understand what happened before, during and after an incident, without capturing facial detail or sensitive personal features, and so respecting resident privacy.

If the lamp detects a fall, or a movement pattern associated with potential risk, it automatically:

1. Raises an alert to staff through the Nobi app or dedicated handset
2. Captures the 30 seconds before and after the event, retaining only the anonymised stick-figure sequence
3. Allows staff to review footage where required to verify what occurred, support safeguarding decisions and inform clinical triage

If no fall is detected, all visual data is automatically deleted, on a 30 second cycle.

Nobi Smart Lamps provide several safety and wellbeing features:

- Detects both witnessed and unwitnessed falls
- Differentiates between a true fall and a resident safely lowering themselves to the floor
- Triggers real time alerts to staff devices

The lamps can alert staff when a resident:

- Sits upright suddenly
- Moves in a way that suggests they may be about to stand
- Displays unusual or unexpected movement patterns

If a resident gets out of bed, the lamp provides soft, automatic night lighting to reduce trip hazards while simultaneously notifying staff if risk is present. The lamp tracks:

- Restlessness
- Time asleep
- Time awake
- Night-time activity

These patterns support early identification of issues such as pain, delirium, urinary tract infections or anxiety.

Using privacy by design the stick-figure protects identity; there is no continuous recording, data is only retained if a fall occurs, and homes remain the data controller; Nobi only processes data on their behalf.

In some specific cases, where the care home considers it beneficial to the resident and explicit consent has been obtained from the resident or their legal representative, the system can be configured to retain full video footage for that individual room. This is only enabled on a room by room basis and following a completed consent process and in accordance with GDPR and the home's data protection policies.

Where full video is enabled, staff see the footage exclusively for safety reviews, fall analysis and safeguarding decisions. Homes remain the data controller, and all processing is carried out under their instruction. If no fall or risk event occurs, no visual data is stored, regardless of imaging mode.

Nobi goes beyond standard falls mats or passive sensors and given the extensive success of the roll out of Nobi Lamps within the Lancashire and Cumbria Integrated Care Board, this technology was chosen.

By gathering real-world evidence from participating providers, the evaluation seeks to inform future commissioning and technology adoption decisions across the Integrated Care System. Although Falls Prevention was the driver for implementation, the outcomes have revealed a wider range of benefits to residents, care providers and their staff, and family.

The project was delivered in collaboration between SNEE ICB, Porters Care (Nobi's UK partner), and participating care providers across Suffolk. Additional support was provided by the Digital Social Care team within Suffolk County Council, who aligned implementation with wider digital maturity work and ensured consistency with the region's data governance and evaluation framework.

The project was funded through the Digital Transformation Fund. Following the successful achievement of over 80% adoption of Digital Social Care Records (DSCR) by March 2024, the programme team identified an opportunity to invest the remaining funding in scalable care technology. The Nobi Smart Lamp was selected for evaluation due to its potential to enhance falls prevention and complement

existing digital systems in care settings. We were able to fund 87 rooms in Suffolk for three years, asking for commitment from the care providers to continue use and pay the licence fees per room for the following fourth year.

Implementation began in early 2025 across a small cohort of care homes and one assisted-living setting, representing a diverse mix of service types and resident needs. Each site was selected based on its readiness to engage with digital technologies, existing Wi-Fi infrastructure, and commitment to improving falls prevention; and in the case of the Assisted Living setting, to explore benefits to residents with needs in other areas than falls. The implementation was phased during the first quarter of 2025 and accompanied by staff training, baseline data collection, and ongoing monitoring to capture both quantitative outcomes and qualitative experiences.

The evaluation explores:

- The experiences of care staff, residents, and families
- Operational and workforce implications for providers
- Benefits across individuals, care providers and integrated care system

2. Methodology

This evaluation used a mixed-methods approach combining quantitative data analysis with qualitative insights from providers, staff, and families. The purpose was to assess the impact of Nobi Smart Lamps on safety, care quality, resident, family, and staff experience, and operational efficiency within Suffolk care settings.

2.1 Evaluation Design

The evaluation explored both measurable outcomes (such as falls, hospital visits, and ambulance callouts) and the lived experiences of those using the technology. A combination of surveys, observational visits (The ICB's Gina Trimble 'walks a mile in their shoes' to see digital care innovations benefiting patients - NHS Suffolk and North East Essex ICB), face to face interviews, bi-weekly teams virtual meetings captured the implementation journey and day-to-day use of Nobi Smart Lamps.

A note on the Walk-A-Mile visits;

Although Nobi Lamps provide both fall detection (alerting staff when a fall occurs) and response support (automatic notifications), the produce is deliberately marketed as a 'falls prevention' technology. This reflects the way the lamps are designed to address risks before a fall happens:

- **Environmental risk reduction:** the lamp provides automatic, low-level lighting when movement is detected at night, reducing hazards associated with poor visibility
- **Early Intervention:** by recognising when someone is getting out of bed, the system creates opportunities to prevent falls rather than simply responding afterwards
- **Alignment with system priorities:** within health and care systems, prevention of avoidable harm is a policy priority, particularly in reducing hospital admissions and costs linked to falls. Positioning of the technology as preventative rather than purely reactive promotes a sense of safety and independence for residents and reassurance for families, avoiding the negative associations of surveillance or inevitability of falls.

In practice, Nobi Lamps offer a blend of prevention, detection and response, and what we've found is a meeting of all three addressing the strategic aims of our system.

2.2 Data Collection Sources

Source	Description	Type	Collection Period
Porters Care	Device generated data including alerts, intervention times, and closure times across participating providers	Quantitative	Mar – Oct 2025
Post Go Live Surveys	Monthly self-reported data from care home managers on falls, hospital admissions, and ambulance callouts	Quantitative	Mar – Oct 2025
Site Visits (Walk a Mile in Their Shoes)	First hand observations and staff interviews carried out during provider visits	Qualitative	Aug – Oct 2025
Provider Testimonies	Feedback from managers, carers and family members on experience, safety, and reassurance	Qualitative	Apr – Oct 2025
Baseline Benefits Questionnaire	Data on hospital visits, falls and ambulance callouts prior to installation of smart lamps	Quantitative	May 2024 – Oct 2025

2.3 Participants

The evaluation included 7 care homes in Suffolk, representing a range of service types:

- Residential and nursing care
- High Dementia residential care
- Assisted living

Each provider was selected on the basis that they had implemented a Digital Social Care Record and were 'digitally mature' in their use of that technology, and willing to expand into the care technology that the smart lamps would provide. The Case Studies are published in full in Appendix 6, baseline data and surveys over 6 months have been analysed, and results complied in section 3.5 onwards and will reflect that care, and reference the use of DSCR alongside the Nobi Smart Lamps, as combined, they provide a continuous recording of care for the residents.

Each provider implemented Nobi Smart Lamps in selected rooms, and ensuite or communal bathrooms, as well as stairwell in the case of The Grange (Assisted Living) to give greater coverage. Staff, residents, and family members were engaged through surveys, interviews and observational visits.

2.4 Data Analysis

Quantitative data were analysed to identify trends in fall rates, response times, and hospital attendances. Qualitative data were reviewed thematically to capture recurring insights into usability, staff experience, and perceived safety. Case study evidence, such as the Eastcotts example, was used to illustrate how outcomes translate into real-world practice.

It should be noted that the quantitative data in respect of falls recorded have not been analysed to understand full the types of falls; we recognised that the Nobi Lamps record any activity ending in a resident on the fall, this can be as a result of residents 'putting' themselves on the floor, a trip fall, a medically induced fall, and an everyday activity such as looking under the bed. Further investigation is required and exceeds the capacity of the team at this time to investigate.

2.5 Limitations

- Incomplete data from some providers as installation timeline was staggered.
- Variations in Wi-Fi connectivity affecting device consistency
- Lack of interoperability between DSCR systems and Nobi platform
- Limited direct resident and family testimony collected to date
- Reasons for 'fall' as explained above not investigated, however some anecdotal evidence is present (an example is Mellish House – more falls are being recorded, it is felt by the care home manager that the increase is due to residents having unwitnessed falls previously. i.e. resident falls, but can get themselves up again fairly quickly)
- Total falls in Nobi-equipped rooms provide the most consistent and interpretable measure of change over time. Homes were also asked how many residents experienced multiple falls; however, this data was returned inconsistently and does not show the number of falls per

individual. As a result, it does not offer meaningful insight and has not been included in the core analysis. Trend data and qualitative evidence offer a clearer picture of impact.

3. Findings - Overview

This section presents evidence from participating providers and explores the impact of Nobi Smart Lamps on care delivery, staff experience, and resident wellbeing. Section 3.5 onwards gives a more rounded view of the findings home by home, they are unique, and this evaluation treats them as such. For the purposes of this evaluation, a fall is defined as an event in which a person unintentionally comes to rest on the round, floor or a lower level, with or without injury. This excludes purposeful or controlled descents, but includes unwitnessed events where a person is found on the floor.

We collected baseline data from the previous 6 months to implementation of the lamps; post implementation we collected monthly data to compare. The metric "number of residents with multiple falls" proved difficult to interpret. It does not show how many falls each resident actually experienced, and data was reported inconsistently between homes. As a result, it does not provide a meaningful basis for analysis, so the evaluation instead focuses on total falls and monthly trends; the results are tabled below:

	Hospital Visits		Hospital Admissions		Length of Hospital Stay		Ambulance Callouts		Number of falls	
Location	**Baseline** (6 months data)	**Post Imp** (Mar-Oct 2025)	**Baseline** (6 months data)	**Post Imp** (Mar-Oct 2025)	**Baseline** (6 months data)	**Post Imp** (Mar-Oct 2025)	**Baseline** (6 months data)	**Post Imp** (Mar-Oct 2025)	**Baseline** (6 months data)	**Post Imp** (Mar-Oct 2025)
Cotman House	6	0	1	0	3	0	6	3	40	42
Mellish House	5	1	4	0	47	0	6	4	35	80
Handford House	8	2	1	1	6	6	17	6	82	82
Hillcroft House	7	3	2	2	3	10	15	9	89	95
Fornham House	4	3	2	1	5	0	4	7	37	28
Eastcotts	12	3	4	1	11	2	14	2	12	11
Totals	**42**	**12**	**14**	**5**	**75**	**18**	**62**	**31**	**295**	**338**

The heatmap below to give overall view of difference made to the metrics from the baseline survey.

Metric	Baseline	Post	% Change
Hospital Visits	Baseline: 42	Post: 12	**Change: -71.4%**
Hospital Admissions	Baseline: 14	Post: 5	**Change: -64.3%**
Length of Stay (Days)	Baseline: 75	Post: 18	**Change: -76.0%**
Ambulance Call-Outs	Baseline: 62	Post: 31	**Change: -50.0%**
Number of Falls	Baseline: 295	Post: 338	**Change: 14.6%**

Number of falls - This is an important insight because it contrasts with the reductions seen in hospital visits, admissions, and length of stay. It suggests that while falls increased slightly, the severity or

consequences of those falls may have been mitigated (as shown by fewer hospital visits and shorter stays).

3.1 Falls Detection and Accuracy

Across all participating homes, one of the most consistently reported benefits of the Nobi Smart Lamp is its ability to accurately distinguish between true falls and controlled descents (e.g., residents lowering themselves to the floor deliberately). This enhanced accuracy was reported repeatedly in staff feedback, observational notes, and case studies, and is supported by provider-level data from Porters Care.

3.1.1 Enhanced Detection and Richer Analysis

The Mellish case study (Appendex 6.1.2) demonstrates how staff use Nobi's detection insights to understand *what actually happened* before, during, and after an incident. Staff explicitly reported that the lamps provide:

- **Greater clarity on whether a fall was genuine or a controlled descent**
- **Better-informed post-fall observations**
- **Accurate evidence to support or avoid safeguarding referrals**
- **Understanding of behavioural patterns**, including repeated lowering behaviour that is not a true fall

From Mellish:

"Staff report that the smart lamp's insights now help them understand exactly what happened before, during, and after each fall… and prevent unnecessary safeguarding alerts through accurate evidence."

This is a powerful confirmation that Nobi's fall differentiation is influencing real-world clinical and operational practices.

3.1.2 Shift in Recorded Fall Volumes Reflects Better Detection, Not Increased Incidents

Mellish recorded an increase in the number of falls (from 35 pre-Nobi to 58 post-Nobi), yet crucially:

- **Hospital admissions fell from 4 to 0**
- **Hospital days reduced from 47 to 0**
- **No unexplained injuries were recorded**
- **Repeat fallers reduced slightly (7 to 6)**

These outcomes reinforce that Nobi is detecting *more events*, but providers are now able to understand which of these are serious and which are not. Staff at Mellish emphasised that many of the newly recorded "falls" were minor or self-resolving events that would not previously have been seen:

"The system captured incidents that previously went undetected, including cases where residents fell and recovered independently."

This is strong evidence for the argument that Nobi improves **accuracy of detection**, rather than increasing actual fall risk.

3.1.3 Qualitative Evidence of Better Differentiation

Walk-A-Mile visits and case studies included in Appendix 6 highlight similar themes:

- Staff can now check whether a resident *lowered themselves safely* instead of falling
- This reduces unnecessary ambulance callouts and intrusive interventions
- It reduces anxiety among night staff
- It supports more confident communication with families
- Providers can target risk management to **actual** fallers, not those who simply end up on the floor

At Mellish, the manager described becoming ***"a little obsessed"*** with reviewing Nobi insights, giving direct evidence of cultural change in falls interpretation:

"I am working with staff to use more in-depth entries on accident forms… analysing a fall on Nobi and what this showed them."

3.1.4 Porters Care Data Supports Improved Event Classification

The Porters Care escalation data (Oct 2025) aligns with this:

- A proportion of events flagged as 'falls' in previous systems are now categorised as non-fall events
- Homes reported fewer false alarms compared to fall mats
- More events are being correctly documented, creating better baseline knowledge of resident movement patterns
- Staff are using the differentiation to adjust care plans for true fallers, not those who simply lower themselves intentionally

Porters Care's aggregated reporting for Suffolk homes shows a consistent pattern of Nobi providing clearer fall categorisation, reducing false positives, and enabling providers to distinguish between genuine incidents and controlled movements.

3.2 Staff Experience and Workflow

3.2.1 Improved Confidence and Clinical Decision-Making

Across participating homes, staff consistently reported that the Nobi Smart Lamps have had a positive impact on their day-to-day working experience, particularly in relation to incident management, prioritisation, and the confidence to make informed decisions.

At Mellish care home, the manager described a notable uplift in staff engagement and confidence:

"***Nobi, I am really beginning to love… staff are beginning to get the hang of it, and I am working with them to use more in-depth entries on accident forms… analysing a fall on Nobi and what this showed them"***

This quote reflects a wider pattern observed across other participating homes; staff are not only using the alerts, they are actively integrating Nobi's insights into their professional judgement and documentation processes.

3.2.2 Greater Clarity, Less Guesswork

Before Nobi, when a resident was found on the floor, staff often had limited information about:

- Whether it was a genuine fall
- How long the resident had been down
- What occurred immediately before the event
- Whether medical escalation was required

Nobi has reduced this uncertainty by providing:

- Real-time alerts
- Quick visual verification
- Clearer evidence for incident forms and safeguarding reports
- A reliable digital history of events

Walk-A-Mile feedback (where this occurred in participating homes) – repeatedly highlighted that staff felt more assured particularly on night shifts, where uncertainty around unwitnessed falls was previously a major stressor.

3.2.3 Workflow Efficiency and Reduced Unnecessary Escalations

Several homes reported time savings and more targeted workflows because Nobi helps staff:

- Avoid unnecessary ambulance calls by confirming non-injurious events
- Prioritise genuine incidents over low-risk behaviour
- Streamline post-fall observations
- Provide clearer handovers during shift changes
- Reduce time spent retrospectively piecing together what happened

Porters Care's ongoing support model also contributed to workflow improvements. Staff reported that once alerts were configured correctly, the lamps produced fewer false alarms than legacy fall mats or passive sensors, reducing alert fatigue and helping teams focus on residents who genuinely needed support.

3.2.4 Strengthening Documentation and Professional Standards

Staff at Hillcroft and other homes described that the availability of accurate fall detail encouraged:

- More precise accident and incident reporting
- Richer narrative entries following alerts
- Better compliance with post fall protocols
- More effective communication with families and regulators

For example, Mellish staff specifically linked Nobi to improved safeguarding practice:

"Insights now help (staff)… prevent unnecessary safeguarding alerts through accurate evidence".

This is a shift in practice, reducing unnecessary referrals whilst ensuring genuine concerns are properly evidenced.

3.2.5 Cultural Change and Staff Engagement

Homes also noted that staff interest in the technology increased as confidence grew. Managers described staff who:

- Regularly checked Nobi insights
- Compared event patterns between residents
- Proactively adjusted care plans
- Became advocates for the system internally

As previously mentioned in a previous section, the quote from Mellish's manager ***"I'm a little obsessed with it now to be honest"***, speaks to the positive cultural adoption that supports sustainable use.

3.2.6 Staff-Reported Benefits of Nobi Smart Lamps

(Combined evidence from participating homes)

Theme	Staff-Reported Benefit	Source(Home / Visit)	Evidence / Quote
Faster response & improved safety	Staff respond more quickly to unwitnessed falls thanks to real-time alerts.	Hillcroft (Walk-A-Mile)	"Key staff receive an immediate notification… the carer can respond right away."
	Reduced time residents spend on the floor.	Mellish Case Study	"Reduces time on the floor, and strengthens overall safety."
	Paramedics able to make quicker decisions due to footage.	Hillcroft (Walk-A-Mile)	"Paramedics now often request to view the fall footage… helping them determine whether a hospital visit is necessary."
Better fall analysis & clinical insight	Clearer understanding of what happened before/during/after a fall.	Mellish	"Understand exactly what happened before, during, and after each fall."
	Ability to differentiate true falls from residents lowering themselves.	Cotman	"Resident safely lowering herself to the floor, not actually falling."
	Full video capture helps validate events (including altercations).	Cotman	"Nobi is effective at detecting unwitnessed falls and even resident altercations."
	Sleep reports used to identify possible health issues (e.g., UTIs).	Hillcroft (Walk-A-Mile)	"Sleep reports assist staff in identifying potential health concerns, such as UTIs."

Theme	Staff-Reported Benefit	Source(Home / Visit)	Evidence / Quote
Reduced unnecessary escalations	Fewer unnecessary hospital trips because evidence supports decisions.	Hillcroft House (8 May)	"System helps paramedics make quicker decisions… led to fewer unnecessary hospital trips."
	Supports avoiding unnecessary safeguarding alerts.	Mellish	"Prevent unnecessary safeguarding alerts through accurate evidence."
Workflow efficiency	Hourly checks now more focused on wellbeing rather than safety checks.	Hillcroft (Walk-A-Mile)	"Hourly check-ins are now more focused on social interaction and emotional wellbeing."
	System runs in the background with minimal effort.	Cotman	"The system is now running in the background and is easy to use."
	Quicker handovers when data and footage can be reviewed.	Hillcroft (Walk-A-Mile)	"Helps paramedics… reduces unnecessary transfers." (improves workflow on busy days)
	Reduces time investigating unwitnessed falls due to video review.	Eastcotts	"Much clearer evidence of how things have happened."
Staff confidence & reassurance	Strong reassurance to staff, especially at night.	Hillcroft (Walk-A-Mile)	Staff now feel confident stepping away briefly "knowing that residents remain safe."
	Improved confidence in decision-making and documentation.	Mellish	"Staff are beginning to use more in-depth entries… analysing a fall on Nobi and what this showed them."
	System is easy to use; staff responded well.	Post Go-Live Interview	"System is easy to use and staff responded well."
Family reassurance & experience	Families feel reassured and more confident in the home.	Eastcotts	"Absolutely brilliant… gives me peace of mind because mum does fall a lot."

Theme	Staff-Reported Benefit	Source(Home / Visit)	Evidence / Quote
	Nobi helps homes attract new residents.	Eastcotts	"Family… chose Eastcotts after seeing the lamps."
Staff learning & professional development	Staff becoming increasingly engaged and "obsessed" in a positive way.	Mellish	"I'm a little obsessed with it now… Staff are beginning to get the hang of it."
	Cue cards and refresher training support onboarding and consistency.	Eastcotts Evaluation	"Instruction leaflets… cue cards for new or agency staff."
Business & operational benefits	Technology contributes to home reputation and business development.	Eastcotts	"Helped them confirm the placement… attracting business."
	Reduced ambulance use = system-level savings.	Healthcare Homes evaluation	"Reducing unnecessary ambulance calls… system savings."

In pulling together the evaluation documentation via interviews, Walk-A-Mile visits and case study development, there are some other benefits that we have identified:

- **Increased staff confidence and autonomy**: Staff reported feeling more comfortable leaving residents briefly, knowing they would be alerted immediately if support was needed.
- **Improved identification of safeguarding concerns**: The system helped staff recognise potential altercations or behaviours of concern more quickly and accurately.
- **Integration into routine practice**: Homes now incorporate Nobi alerts into their monthly falls reporting processes, improving the accuracy and completeness of data.
- **Enhanced organisational profile**: Adoption of digital innovation has strengthened the home's reputation with families and regulators, supporting occupancy and market positioning.
- **Positive staff perceptions**: Staff commonly described the system as "amazing", "part of the day", and "really useful", reflecting strong acceptance and cultural embedding.
- **Particular value for night staff**: Night teams emphasised the reassurance provided by real-time alerts and the ability to respond earlier to resident needs.
- **Clearer evidence for incident investigations**: Anonymised visual data supports more accurate reviews of falls, altercations and safeguarding events.
- **Reduced time to intervene after a fall:** Data supplied by Porters Care shows that Nobi significantly shortens the time between a fall occurring and staff being able to respond. Faster intervention reduces the length of time a resident spends on the floor, lowers the risk of

complications, and supports safer decision-making about whether a hospital transfer is required**.**

- **Operational and staffing pressures linked to hospital transfers:** Avoiding unnecessary hospital visits delivers substantial operational benefits for care homes. When a resident is transferred to hospital, a staff member must accompany them, remain with them, often beyond their shift, and arrange safe return to the home. This creates a cascade of costs, including staff backfill in the home, overtime or additional staffing to cover extended hospital stays, and disruption to wider care routines. Reductions in avoidable transfers therefore release staff capacity, minimise financial strain, and improve continuity of care for other residents.

3.3 The Grange: A Distinct, but Highly Valuable Setting

Unlike other participating homes, The Grange is an assisted living environment, supporting adults with learning disabilities, autism, mental health needs, epilepsy and complex behaviours. Residents here live more independently, with goals centred on autonomy, wellbeing, emotional regulation, and maintaining routines, not just physical care needs.

This makes the Grange a completely different test environment for the smart lamps, and the outcomes demonstrate that the technology can support more than just falls detection. It has shown measurable benefits in areas that traditional residential and nursing settings cannot capture.

Residents are a mix of young, middle-aged and older with diverse support needs. Safety concerns relate not only to falls, but also to self-harm, absconding, complex night-time behaviours, and epilepsy. Staff require a balance between respecting independence and ensuring safety without intrusion. Emotional wellbeing and mental health needs are the priority during night-time support. Because of this, the Grange acts as a stress test for the flexibility of the Nobi Smart Lamps:

Can it support a setting where behaviour, autonomy, and emotional needs are as important as physical safety?

The answer based on the evidence is a resounding yes, and with impressive results.

3.3.1 Unique Value Demonstrated by The Grange

Staff use the lamps to spot sleep disruption and intervene early when residents experience:

- Auditory hallucinations
- Distress
- Patterns linked to self-harm

This allows staff to provide early reassurance or distraction, preventing escalation. This type of outcome is unique to The Grange and shows how Nobi can be a tool for psychological as well as physical safety.

3.3.2 Enabling Independence Without Intrusion

Nobi allowed a new resident with a history of absconding to settle faster because staff no longer needed to do constant door checks, thus balancing dignity, autonomy and safeguarding, in a way that reduces anxiety for staff and residents

3.3.3 Monitoring Complex Health Conditions

For residents with epilepsy, Nobi supported sleep pattern monitoring, identifying possible seizure activity, early detection of health changes (e.g. UTIs and tooth infection). This demonstrates the versatility of the system for complex needs.

3.3.4 Transforming Night-Time Care

Nobi has reshaped night duties by allowing staff to monitor safety without waking residents. Pre-Nobi staff had to do hourly checks on residents, opening the door to their rooms, which allowed the light from the hallway in, and generally resulted in waking the resident. Now staff respond only when needed, this has improved the quality and calmness of night support. This is so valuable in assisted living, where unnecessary disturbance can impact routines, behaviour, and wellbeing.

3.3.5 Data-Informed Mental Health and GP Reviews

Staff use lamp generated sleep and activity data to support GP consultations, medication reviews and mental health support planning. Again, this type of purposeful, behavioural data use is specific to The Grange.

3.3.6 Family Reassurance

Families of residents at The Grange report that the system provides reassurance, a sense of dignity and confidence that staff can respond early; this reinforces a message of trust and quality of care.

In summary, The Grange shows what Nobi can do when the definition of “safety” is broader than falls.

The findings indicates that Nobi Smart Lamps enhance fall detection, response times, and staff confidence. While not yet reducing the overall number of falls, evidence points to improved safety, reassurance, and data-driven care. Integration with DSCR supports more connected, efficient practice.

3.4 Eastcotts Residential Nursing Home

3.4.1 Overview

Eastcotts Residential Nursing Home, operated by Raveedha Care Ltd, provides specialist dementia care for 46 residents, including five Discharge to Assess (D2A) rooms. The home has embraced digital transformation as part of the Suffolk and North East Essex Integrated Care Board (SNEE ICB) Digitising Social Care programme.

Through the implementation of CareVision Digital Social Care Records (DSCR) and Nobi Smart Lamps, Eastcotts has demonstrated how technology can enhance safety, independence, and dignity for residents living with dementia, while supporting staff confidence and family reassurance.

3.4.2 Digital Transformation

The introduction of the CareVision DSCR has revolutionised the way care is delivered and recorded.

Staff now complete updates in real time via smartphones, giving managers immediate oversight and removing the inefficiencies of paper-based systems.

"Previously, notes were often written on paper and could be overlooked. Now, with DSCR, all information is consolidated in one place and visible in real time. I was nervous at first, but now I feel supported and more confident. I never thought I'd be using smartphones for care.""

The system has eliminated lengthy handovers—previously lasting up to 30 minutes—by replacing them with quick phone logins and review checklists. This not only saves time but ensures continuity of care and reduces the risk of missed information. Staff report that the move to digital has increased confidence, particularly among older team members who were initially apprehensive about technology.

3.4.3 Nobi Smart Lamps – Falls Prevention and Early Intervention

The installation of Nobi Smart Lamps has had a transformative impact on safety and reassurance at Eastcotts. Staff describe the lamps as "*amazing*" and particularly valuable for detecting falls in residents who are unable to use call bells or verbalise distress. The system alerts staff instantly, enabling faster response and reducing the likelihood of prolonged incidents. Of the 46 rooms, Eastcotts has had 20 Nobi Smart Lamps installed.

A daughter of one resident shared:

" The Nobi light gives me peace of mind because Mum does fall a lot. I felt guilty about her going into a home, but now I know staff are alerted instantly and can be there straight away."

The lights have also enhanced resident autonomy, allowing individuals at risk of falls to spend private time in their rooms without continuous supervision.

Ambulance crews have begun to request Nobi footage following callouts, helping to verify the nature of falls and avoid unnecessary hospital conveyance. This evidence-based approach has increased trust among emergency services and family members alike.

3.4.4 Quantitative Outcomes (June–August 2025)

Indicator	Baseline	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025	Trend
Falls	12	3	4	2	2	0	0	↓ **Decreasing**
Ambulance callouts	14	1	0	1	0	0	1	↓ **Decreasing**
Hospital visits	12	1	1	1	0	0	0	↓ **Decreasing**
Hospital admissions	4	1	0	0	0	0	0	↓ **Decreasing**
Length of Hospital Stay	11	2	0	0	0	0	0	↓ **Decreasing**

Eastcotts have a total of 20 rooms with Nobi Smart Lamps installed. Since installation, Eastcotts has seen a sustained reduction in hospital visits related to falls and no recorded hospital admissions. Staff report that the Nobi system provides vital reassurance for residents who cannot summon help independently, ensuring timely intervention and prevention of escalation.

3.4.5 Culture and Human Impact

The combination of DSCR and Nobi has fostered a new digital-first culture grounded in compassionate care. Staff feel empowered and supported; families experience reduced guilt and greater trust in the home's ability to keep loved ones safe.

Gina Trimble's *Walk a Mile in Their Shoes* visit on 3 September 2025 captured the spirit of this transformation. During the visit, a resident, reported as often restless and disengaged, was observed deeply absorbed in conversation with Gina about trains, sparked by a book he had on the table. This moment reflected how technology and empathy can coexist in a truly person-centred environment.

"The Eastcotts team have created a person-centred environment where digital tools support, rather than replace, human care." Gina Trimble, Provider Liaison Manager, SNEE ICB

3.4.6 Challenges and Opportunities

Interoperability: Lack of integration with NHS systems continues to create duplication of effort in data recording. Nobi is currently working with Nourish and PCS Suppliers of DSCR.
Evidence of System Impact: Quantifying avoided ambulance callouts could further demonstrate the financial and operational value of Nobi.
Scaling Best Practice: Eastcotts offers a strong model for wider adoption across dementia care settings, highlighting how technology can improve safety, efficiency, and staff wellbeing.

3.4.7 Summary

Eastcotts exemplifies how digital transformation can elevate the standard of dementia care.

The dual implementation of DSCR and Nobi Smart Lamps has produced measurable benefits in response times and family confidence, while also nurturing a digitally confident workforce. The home stands as a regional example of best practice in person-centred, technology-enabled care.

3.5 Caring Homes Group – Cotman House and Mellish House

Caring Homes Group operates a network of residential and nursing homes across the UK, with two Suffolk-based services, Cotman House and Mellish House, participating in the Nobi Smart Lamp project. Both homes provide dementia and older people's care with a large organisational structure that already utilises digital social care records (Person Centred Care or PCS). The implementation of Nobi Smart Lamps offered an opportunity to enhance falls prevention and response within a busy, multi-layered care model.

3.5.1 Cotman House – Early Learnings and Technical Challenges

At Cotman House, Nobi Smart Lamps were installed in several resident rooms in early 2025. The initial phase presented significant technical and environmental challenges that affected performance and staff confidence. Wifi instability, call-bell system interference, and login issues caused inconsistent alerts and data capture during the first months of use.

Early survey data (April to August 2025) recorded no hospital visits or ambulance callouts for residents in rooms fitted with Nobi. However, nine falls were reported in the first monitoring period, only four of which were capture by the system, primarily due to connectivity problems.

Staff described the lamps as "*user friendly*" but noted that "*several technical issues meant we were not yet operating at full capacity*". Notifications to staff handsets were not enable initially, resulting in delayed alerts. Despite these challenges, the system still demonstrated potential to provide more accurate fall data and reduce unwitnessed incidents once stabilised.

Feedback from managers reflected frustration with the staggered rollout and technical reliability, but confidence in the product's future potential. The site identified several key lessons:

- Conduct Wi-Fi audits and infrastructure tests in all rooms before installation
- Schedule refresher training sessions immediately prior to go-live
- Ensure notification pathways are verified before handover.

By late summer 2025, technical issues had been largely resolved, and staff expressed interest in expanding the technology once stable.

"We anticipate this to improve over the next month, and hope to see the full benefits of Nobi once all technical issues are resolved" – Manager, Cotman House.

3.5.2 Mellish House – Positive Adoption and Cultural Shift

In contrast, Mellish House demonstrated a more settled and positive implementation. Initial connectivity problems were quickly addressed, and by mid-2025 the system was being used effectively for both real-time alerts and post-incident analysis.

Staff reported that Nobi had helped identify previously unwitnessed falls and near-miss incidents, providing crucial learning opportunities. One example involved a resident thought to have been incorrectly identified as having fallen, when discovered walking in the corridor; Nobi footage revealed the individual had fallen and recovered independently, prompting a review of their falls risk planning.

The Mellish team described the system as "beneficial and reassuring", particularly for alerting staff between routine observation checks. Staff confidence improved significantly once they learned to adjust sensitivity settings and review video footage effectively.

"I'm a little obsessed with it now, to be honest. Staff are getting the hang of it, and using the video to analyse what actually happened before and during a fall" – Home Manager, Mellish House.

Family feedback has been positive, with relatives expressing reassurance that incidents are captured accurately and staff can respond quickly. The system has also enhanced safeguarding; one case demonstrated how Nobi footage provided vital context for paramedics, preventing unnecessary delay and clarifying the nature of an injury.

"Without Nobi, some incidents would go unnoticed and could lead to unexplained injuries or safeguarding concerns." – Deputy Manager, Mellish House

3.5.3 Quantitative Summary

Indicator	Baseline (6 months pre implementation) Total	Cotman House (Apr – Oct 2025)	Mellish House (Apr – Oct 2025)	Insights / Trend
Rooms fitted with Nobi	0	12	12	Equal installation footprint
Hospital visits	11	0	1	90.9% reduction
Hospital Admissions	5	0	0	100% reduction
Length of Hospital Stay	50 days	0	0	100% reduction
Ambulance Callouts	12	3	4	42% reduction
Falls recorded	75	42	80	63% increase

3.5.4 Interpretation

- Across both Caring Homes sites, ambulance callouts reduced, with no hospital admissions recorded and just one visit recorded, a clear indication of faster staff intervention and fewer escalations to emergency services.
- This represents and 80-85% reduction in ambulance conveyance to hospital compared to the six months prior to implementation.
- Callouts have reduced by a 42% reduction across the two homes, indicating staff are not simply 'under reporting' or avoiding escalation, but are making more informed decisions about when an ambulance is genuinely required. At Cotman for example, Nobi footage and alerts have been used to confirm what actually happened and support proportionate responses to incidents and altercations.
- Although falls continued to occur and have increased, they are better detected and responded to and managed safely in the home avoiding escalation to secondary care. This is consistent with four Mellish residents accounting for 47 hospital days pre-Nobi and none post-implementation. Clear evidence of minimising harm and avoiding unnecessary hospital transfers.
- Total recorded falls in Nobi rooms have increased by 63%; this is in line with what Mellish staff reporting in that Nobi is capturing events that previously went unseen, including residents who fall and get themselves back up or safely lower themselves to the floor.

- Nobi has changed what is visible and therefore what is counted as a fall. The rise in recorded falls should be interpreted as improved detection and recording accuracy, rather than an increase in actual risk.
- Combined with improved staff familiarity and reduced false alerts, the data suggest that Nobi has enhanced safety, confidence and efficiency within the Caring Homes Group.

3.5.5 Summary and Reflections

The two Caring Homes sites illustrate both the challenges and potential of implementing AI-enabled fall detection in large care organisations.

- Cotman House faced early operational barriers linked to Wi-Fi and training gaps but demonstrated steady improvement once stabilised
- Mellish House showcased growing staff confidence, clear examples of safeguarding benefit, and stronger integration of Nobi into daily care routines.

Together, these homes highlight the importance of consistent infrastructure, hands-on training, and early troubleshooting in ensuring technology delivers its intended outcomes. Despite differing starting points, both sites acknowledged Nobi's value in promoting safety, insight, and peace of mind for staff, residents, and families.

3.6 HealthCare Homes

3.6.1 Hillcroft House – Overview

Hillcroft House, part of the Healthcare Homes Group, provides residential and nursing care for older people, many living with dementia and high falls risk. As part of the Nobi Smart Lamp project, initially 9 lamps were installed across selected rooms, Hillcroft installed another 7 lamps during July and August following our agreement with NHS England to spend remaining funding on care technology in our system. 16 Lamps in total, are now installed to enhance falls prevention, staff response, and clinical insight. Hillcroft's experience illustrates how an initially cautious implementation can evolve into a confident, data-driven approach. The home has moved from trailing a new system to integrating Nobi Smart Lamps into daily care and operational routines, including sleep monitoring, staff training and clinical decision-making.

3.6.2 Implementation and Early Challenges

In the early stages, Hillcroft encountered connection issues, false positives and delays in alerts. Staff reported that some falls went undetected or were incorrectly flagged, prompting immediate follow up with Nobi and Porters Care. These technical issues were traced to Wi-Fi coverage gaps and resolved through configuration adjustments and improved local coordination.

An additional learning point was that only senior staff initially carried the alert handset, limited the speed of wider team responses. Managers have since requested the 'in-app calling feature' which would allow multiple staff to receive alerts simultaneously, a feature now being piloted nationally. This is scheduled to be rolled out in January 2026, with training to support staff.

"We have had a number of reported falls since they were installed… we've had issues where Nobi alerted to a fall which had not occurred, but this has been raised and investigated" – Home Manager, Hillcroft House (March 2025)

"The in-app calling will be a real game-changer. It'll make sure everyone knows at the same time if a fall occurs, not just the person with the phone".

Staff described a learning curve in adapting to the technology, particularly in understanding how to close escalations and review data through the system. Over time, familiarity grew, and by mid-2025 the team reported that Nobi was "***embedding as part of the daily workflow***".

3.6.3 Quantitative Summary

Indicator	Pre-installation (Baseline)	Post Installation (Mar-Oct 25)	Change / Trend
Rooms fitted with Nobi	-	16	
Hospital visits	7	3	57% Reduction
Hospital admissions	7	2	71% Reduction
Ambulance callouts	15	9	40% Reduction
Falls recorded	89	95	7% increase (better detection)
Length of hospital stay post fall	3	10	Increase reflects severity in one case

3.6.4 Summary

Hillcroft House has achieved strong reductions in hospital visits (57%), hospital admissions (71%), and ambulance callouts (40%) in the months following Nobi implementation.

The slight increase in recorded falls reflects improved detection, not increased risk, a trend echoed in other homes with high dementia residents using Nobi.

These outcomes indicate safer on-site management of incidents, better-informed clinical decision-making, and more appropriate escalation pathways.

3.6.5 Staff Experience and System Integration

Staff feedback gathered through post-go-live surveys and Walk-A-Mile visits, and face to face follow-up meetings and emails indicates growing confidence, improved workflows, and richer insight into resident needs. The 'live view' functionality has proven essential for analysing incidents and understanding the cause of falls, particularly in distinguishing genuine events from residents lowering themselves to the floor.

"At the start, footage didn't help us analyse falls, but once live view was turned on, it changed everything. We can now see what really happened before and after a fall." – Deputy Manager, Hillcroft House

In later months, sleep reports emerged as a highly valued feature. Staff used these insights to identify patterns of restlessness, review hydration and medication schedules, and make small but meaningful care adjustments.

"The sleep reports are amazing. They help us spot patterns and make small changes that make a big impact on residents' comfort". – Care Team Feedback, May 2025

Management also reported that Nobi's data enabled more proactive engagement with families and clinical partners. Paramedics were able to triage more effectively with accurate footage and timestamps, reducing unnecessary hospital transfers.

"We can now give ambulance crews precise information on what happened. It's saved time, and residents avoid the distress of an unnecessary hospital trip". – Operations Lead, Healthcare Homes (June 2025)

Staff also report improved assurance across night shifts and greater confidence to step away from rooms briefly, knowing that alerts will notify them of genuine risks.

3.6.6 Governance and Learning

Following a data protection audit at another of their homes, Healthcare Homes introduced standardised consent posters for staff and visitors, ensuring transparency and compliance with GDPR requirements. These posters are now displayed at all sites and have become part of Healthcare Homes' onboarding and inspection checklist.

"We've made consent a visual and cultural process, posters in reception, forms in induction packs, and clear communication with families. It's helped normalise the technology". – Operations Lead, Healthcare Homes.

Incident follow-ups revealed that Nobi has been instrumental in safeguarding reviews, providing clear visual evidence that helped clarify causes of injury and prevent future risk.

The group has also recognised the business efficiency value of Nobi, more accurate reporting, fewer ambulance delays and stronger regulatory assurance during inspections.

3.6.7 Resident and Family Impact

Hillcroft residents, many living with advanced dementia, cannot always provide direct feedback, but family members have expressed heightened reassurance knowing that care teams have real-time visibility of falls and overnight movements.

"It's reassuring to have such equipment in the home, we can see how it helps staff to act quickly". – Family Feedback, August 2025

Families also value the additional visibility and explanation provided when reviewing incidents supported by accurate timestamps and fall narratives.

3.6.8 Lessons Learned and Next Steps

Hillcroft's journey underscores the importance of connectivity, communication, and culture in successful adoption. Early challenges with false alerts and notification pathways were addressed through collaboration between the Provider Liaison Manager from the ICB, Porters Care and Healthcare Homes leadership team.

Plans are in place to continue expanding lamp deployment and to participate in cross-provider learning sessions to share experience with other Suffolk homes.

"We're learning more every month, the technology is no longer just about falls, it's helping us plan care, spot trends, and reassure families." – Operations Lead, Healthcare Homes, August 2025.

3.6.9 Summary

Hillcroft House has achieved a clear and sustained reduction in falls, ambulance callouts, and hospital visits since adopting Nobi Smart Lamps. The system now forms an integral part of the home's safety and quality framework, driving improvements in staff confidence, family reassurance, and operational efficiency.

The experience at Hillcroft reflects Healthcare Homes' digital maturity and commitment to embedding technology that supports both safety and person-centred care.

3.6.10 Handford House - Overview

Handford House, part of the Healthcare Homes Group, provides residential and nursing care for older adults, many with dementia and complex needs. As an early adopter within the Nobi project, the home installed lamps in a cohort of 8 rooms in February 2025.

The aim was to enhance falls prevention, response speed, and resident safety through AI enabled detection and sleep monitoring. Over the first six months, Handford House demonstrated clear operational benefits and valuable learning around digital integration, staff workflow and data governance.

3.6.11 Implementation and Early Experience

Staff reported an overall positive experience, with quick response to alerts and improved awareness of resident movements. Initially, the Nobi app was not installed on the staff phone, which meant alerts were accessed via laptops, limiting responsiveness. Once this was resolved, staff described the system as *"effective and reliable".*

"The system is very effective in detecting falls and staff are alerted promptly". – Manager, Handford House (March 2025)

Care quality and safety were perceived to have improved due to faster responses and better visibility. The team recommended expanding Nobi to other homes, with small adjustments such as a pause button for cleaning periods to prevent false alerts.

3.6.12 Quantative Summary

Indicator	Pre-installation (baseline)	Post Installation (Mar – Oct 2025)	Change / Trend
Rooms fitted with Nobi		8	
Hospital Visits	8	2	75% Reduction
Hospital Admissions	1	1	No Change
Length of Hospital Stay	6	6	No change
Ambulance Callouts	17	6	65% Reduction
Falls recorded	82	82	No change in volume

Handford House shows a substantial reduction in hospital visits (75%) and ambulance callouts (almost 65%) from Nobi equipped rooms over the first six months of implementation; Hospital admissions and total bed days remain stable (1 admission, 6 days) suggesting that when residents do need acute care, it is appropriate and necessary, rather than avoidable. The number of recorded falls is unchanged, which is notable, given that Nobi can increase reporting by detecting unwitnessed events. We can deduce that improved detection may be offset by earlier intervention and better monitoring resulting in a stable overall fall count. Continuation of reporting falls in subsequent months will prove or disprove this assumption.

3.6.13 Governance and Learning

Handford House has been central to wider governance and data protection learning across the Healthcare Homes group. A detailed family query about data protection, consent and data flows

prompted a clear transparent response from the ICB, outlining the privacy by design (stick figure view) short footage retention unless a fall occurs, and aggregation of evaluation data (no resident identifiable data shared with ICB). Following this, the family member confirmed they were happy to give consent demonstrating that open dialogue can build trust and reassurance.

In parallel Healthcare Homes introduced standardised advisory posters and consent processes across their homes after a data protection review. These posters are now part of the onboarding and inspection checklist, helping to normalise the technology and maintain GDPR compliance.

3.6.14 Resident and Family Impact

Many residents at Handford are unable to comment directly on the technology, but family voice has been a defining feature of this site. Family members have actively engaged with questions and have let staff know they appreciate the additional reassurance that falls and nighttime movements are monitored and that staff can respond quickly, supported by evidence from the lamps. The combination of transparent communication and visible safety benefit has helped position the lamps as a positive, protective measure rather than intrusive surveillance.

3.6.15 Lessons Learned and Next Steps

Handford's experiences surfaces several important lessons:

- **Alert pathways matter:** ensuring that alerts reach multiple staff (e.g. via in-app calling) is critical for maximising the value of the system; restricting alerts to a single device can undermine responsiveness.
- **Connectivity is foundational:** ongoing work to address Wi-Fi dropouts (particularly in bathrooms) has been essential to ensure consistent performance.
- **Governance and communication build trust:** the detailed engagement with families around consent and data protection at Handford has directly informed wider governance practice across the pilot.

Staff have indicated that they would recommend continuing and expanding the use of Nobi Smart Lamps, describing the change as positive for both residents and staff.

3.6.16 Summary

Handford House's data shows a sharp reduction in hospital visits and ambulance callouts from Nobi-equipped rooms, with stable hospital admissions and fall numbers.

Combined with strong qualitative feedback on sleep reports, fall detection and family reassurance, Handford demonstrates that:

- Nobi can improve escalation quality (fewer, more appropriate hospital transfers)
- transparent governance and family communication are key enablers of adoption
- even in the context of early technical challenges, staff experience the system as a net positive for safety, workload and assurance.

3.6.17 Fornham House - Overview

Fornham House is part of the Healthcare Homes Group, provides residential, palliative and respite care for older adults, many with dementia and complex needs. An early adopter within the Nobi project, the home installed lamps in a cohort of 9 rooms in February 2025.

The aim was to strengthen falls prevention, including unwitnessed night-time incidents, and response speed, and resident safety through AI enabled detection and sleep monitoring; provide staff with clearer insight into sleep patterns and resident activity; reduce unnecessary ambulance callouts and hospital visits an build staff confidence through reliable alerting and improved visibility. Over the first six months, Fornham House integrated Nobi data into existing care planning, risk management and handover processes.

3.6.18 Quantitative Summary

Indicator	Pre-installation (baseline)	Post Installation (Mar – Oct 2025)	Change / Trend
Rooms fitted with Nobi		9	
Hospital Visits	4	3	75% reduction
Hospital Admissions	2	1	50% reduction
Length of Hospital Stay	5	0	100% Reduction
Ambulance Callouts	4	7	Increase but Jun-Oct Avg of 0.5 per month
Falls recorded	37	28	

Overall, Fornham House is seeing fewer falls and far less hospital utilisation, alongside an increase in ambulance attendances that appears to support early assessment and safe management in the home.

3.6.19 Staff Experience and System Integration

Staff at Fornham House reported that the introduction of the Nobi Smart Lamps has steadily improved their confidence, workflow, and ability to respond to night-time risks. Although initial adjustment took time, particularly for night staff, the lamps quickly became part of the daily rhythm of the home.

Staff highlighted that Nobi reliably detected falls and that alerts came through quickly: ***"We were contacted on the dedicated phone quickly and the senior went to the room."***

Night staff were slower to build confidence, but this was described as a broader pattern with new technologies rather than a Nobi-specific issue.

A formalised process has now been implemented to ensure continuity across shifts: ***"We now have a process at both handovers where responsibility for the NOBI phone is handed over and anything received is included in the handover."*** This has strengthened accountability and helped staff become more consistent in acknowledging and closing alerts.

The lamps have helped staff respond more appropriately and spend less time investigating ambiguous falls: ***"With one of our fallers… she puts herself on the floor. So we have spent less time investigating after she had a 'fall'."***

The introduction of in-app notifications across all senior handsets also improved responsiveness and reduced reliance on a single device.

Sleep patterns emerged as the feature with the most immediate impact: ***"It is good for staff to go in and encourage fluids and check toilet support before they go to sleep properly."*** These small interventions have supported better comfort, hydration and night-time stability.

Overall, staff describe the system as user-friendly and increasingly embedded, with expectations that benefits will grow as more features are utilised.

3.6.20 Governance and Learning

The Fornham implementation surfaced several important governance insights that have contributed to both local and programme-wide learning.

Alert pathways as a governance requirement: Using a single device for alerts proved insufficient for a home operating across two units: ***"Only having one device that rings from Nobi but our lamps are on two different units."*** Switching to multi-device notifications was therefore essential for safe practice and is now a recommended configuration for all homes.

False alerts and operational protocols: Fornham identified a common cause of false alarms, cleaners kneeling on the floor: ***"We have false alarms from cleaners… they need to get down on the floor."***

The staff proposed a cleaning-mode wall button, which has since become a recommended improvement for wider rollout.

Embedding Nobi into workflow governance has meant the home has formalised:

- Handover processes
- Alert management
- Escalation records
- The use of sleep data in care notes

These steps have strengthened internal oversight and staff accountability.

3.6.21 Resident and Family Impact

Residents with capacity reported feeling reassured and interested in the technology: ***"The residents with capacity have been very interested in the lamps and say they feel reassured".***

For residents without capacity, the benefits are reflected through safer night-time care, faster staff response and fewer distressing hospital transfers.

Families benefit indirectly through:

- Fewer hospital visits
- Improved staff understanding of incidents
- Clearer communication about falls and sleep patterns

There have been no concerns raised by residents or families, even as more features (e.g. sit up detection, night lights) have been activated.

3.6.22 Lessons Learned and Next Steps

- **Multi-device alerting is essential**
  Moving alerts from a single handset to all senior phones significantly improved responsiveness.
- **Staff confidence increases over time**
  Initial apprehension gave way to trust as staff saw the system working consistently.
- **Sleep data is a powerful early tool**
  Even before full fall-prevention features were used, sleep patterns helped staff improve hydration and toileting routines.
- **False alarms can be reduced with simple procedural changes**
  Cleaning-mode solutions would prevent unnecessary alerts and improve workflow.
- **Handover processes improve consistency**
  Including Nobi events in every handover embeds the system into daily practice.

Next steps:

- Continue expanding use of smart features (e.g., potential fall alerts).
- Explore cleaning-mode infrastructure to reduce false alerts.
- Consider safe relocation of lamps to other rooms as resident needs change.
- Maintain multi-device alerts to ensure safe staffing.
- Participate in cross-provider learning as the technology matures: ***"Yes – especially if we were confident moving the lamps to other rooms."***

3.6.23 Summary

Fornham House has demonstrated meaningful improvements in safety, escalation management and care quality since adopting Nobi Smart Lamps. Despite an increase in ambulance callouts, these were accompanied by lower admissions and no hospital days, suggesting more appropriate use of on-site clinical triage. Fornham House is now well embedded with the technology, with growing staff confidence, a culture of proactive care, and a clear pathway for deepening use of the system as part of its safety and quality approach.

4. System Savings

Outcome	Fiscal Value	Year	Source
Ambulance services - average cost of call out, per incident	£334	2020/21	GMCA Unit Cost Database
Average cost per hospital inpatient admission - non-elective	£2,713	2020/21	GMCA Unit Cost Database*includes cost of bed £901.00
Average cost per day for non-elective NHS hospital beds	£901	2020/21	UK Parliament
Average cost of A&E attendance, no admission	£117	2020/21	GMCA Unit Cost Database

1. Hospital Visits				
Location	**Before**	**After**	**Change**	**Savings**
Cotman House	6	0	-6	**-£702**
Mellish House	5	1	-4	**-£468**
Handford House	8	2	-6	**-£702**
Hillcroft House	7	3	-4	**-£468**
Fornham House	4	3	-1	**-£117**
Eastcotts	12	3	-9	**-£1,053**
Total	**42**	**12**	**-30**	**-£3,510**

2. Hospital Admissions				
Location	**Before**	**After**	**Change**	**Savings**
Cotman House	1	0	-1	**-£2,713**
Mellish House	4	0	-4	**-£10,852**
Handford House	1	1	0	**£0**
Hillcroft House	2	2	0	**£0**
Fornham House	2	1	-1	**-£2,713**
Eastcotts	4	1	-3	**-£8,139**
Total	**14**	**5**	**-9**	**-£24,417**

3. Length of Stay				
Location	**Before**	**After**	**Change**	**Savings**
Cotman House	3	0	-3	**-£2,703**
Mellish House	47	0	-47	**-£42,347**
Handford House	6	6	0	
Hillcroft House	3	10	7	**£6,307**
Fornham House	5	0	-5	**-£13,565**
Eastcotts	11	2	-9	**-£8,109**
Total				**-£60,417**

4. Ambulance Call Outs				
Location	**Before**	**After**	**Change**	**Savings**
Cotman House	6	3	-3	**-£1,002**
Mellish House	6	4	-2	**-£668**
Handford House	17	6	-11	**-£3,674**
Hillcroft House	15	9	-6	**-£2,004**
Fornham House	4	7	3	**£1,002**
Eastcotts	14	2	-12	**-£4,008**
Total	**75**	**18**	**-57**	**-£10,354**

Across the participating homes, except for The Grange where we have evaluated qualitatively and gauged savings to the residents and staff in care and dignity, the introduction of Nobi Smart Lamps has coincided with a substantial reduction in emergency care activity. Using standard NHS 2020/21 reference costs for hospital admissions, bed days, ambulance callouts and A&E attendances, the combined data from all sites indicates an estimated £89,000 reduction in emergency care related costs over the six-month post implementation period. These figures are indicative avoided costs rather than cash releasing savings, but they demonstrate a clear shift in how incidents are managed with fewer hospital visits, fewer admissions, no bed days in several homes, and a significant fall in ambulance use in most settings.

This represents not only reduced pressure on the wider system, but also less disruption for residents, who are more often supported safely within the home, avoiding the physical and psychological risks associated with unnecessary hospital contacts.

4.1 Return on Investment

Using standard 2020/21 NHS reference costs, the combined Nobi homes show an estimated £89k reduction in emergency-care–related costs over the first six months post-implementation. If this pattern is sustained, this equates to approximately £534k of avoided cost over the three-year licence period, against an initial investment of £180.6k. This corresponds to an indicative return on investment of around 196%, or just under £3 of avoided emergency-care cost for every £1 invested, with the programme expected to pay back its original investment within roughly 12 months. These figures represent avoided system costs rather than cash-releasing savings, but they demonstrate a clear and positive economic impact alongside the clinical and operational benefits described above.

5. Recommendations

Nobi Smart Lamps demonstrate measurable and perceived benefits across Suffolk care homes, particularly in detecting unwitnessed falls and reducing response times. The project aligns with Digitising Social Care objectives of improving safety, efficiency, and outcomes. Ongoing data collection and engagement will strengthen evidence for broader adoption.

5.1 Prioritise Digital Solutions That Reduce Operational Burden, Not Adds to It

With ICB workforce capacity reducing significantly, future digital investment must focus on technologies that automate risk monitoring, reduce manual tasks, and prevent avoidable escalation. The Nobi lamps demonstrate this principle clearly by decreasing hospital visits, ambulance callouts, and time spent investigating unwitnessed falls.

5.2 Move Toward a "Self-Sustaining Digital Adoption Model" for Care Providers

Given diminished capacity for hands-on support from the ICB, the next phase should focus on:

- Simple onboarding materials (cue cards, standardised videos and FAQs)
- Peer-to-peer learning – communities of practice
- Supplier run refresher training
- Self-serve digital resources

Homes like Eastcotts and Hillcroft have already created local best practices that can be standardised.

Develop a light-touch, scalable support mode that enables providers to adopt, maintain and optimise technology independently, supported by consistent documentation and supplier partnerships rather than continuous ICB led resource.

5.3 Embed Smart Fall Prevention Technology into Standard Commissioning Expectations

As the 10-year plan calls for accelerated 'analogue to digital' transformation, technology like Nobi should not sit as an optional innovation but be progressively normalised in market shaping guidance, quality frameworks, provider digital maturity pathways, and the falls prevention strategy. Positioning smart monitoring as a recommended standard in commissioning intentions for older people's care and supported living rather than as an option.

5.4 Strengthen Cross Provider Learning and Digital Communities of Practice

The evaluation shows that providers benefit from learning from each other far more than from one-to-one support. This approach is more sustainable. A digital social care community of practice should be established where early adopters can mentor new providers and share lessons.

5.5 Maintain a Tight Strategic Partnership with Suppliers

Suppliers should deliver onboarding, technical training, troubleshooting, refresher sessions and implementation guidance, whilst ICB oversight ensures consistency, outcomes monitoring and safeguarding governance.

5.6 Expand Smart Monitoring Beyond Falls into Predictive and Preventative Care

Examples already emerging:

- UTI detection through disrupted sleep

- Behavioural insights for LD/autism support
- Early identification of emerging health needs
- Self-harm risk monitoring
- Epilepsy pattern detection.

Invest in next-phase capability development to harness predictive analytics across both older people's care and learning disability services.

5.7 Align Future Funding Bids with National 'Analogue to Digital' Priorities

Even as national structures shift, government signals remain clear – the next decade demands digitisation of care.

We should position smart monitoring projects as core to ICS digital transformation and prevention strategies.

In summary we should:

- Prioritise care technology that reduces operational and system burden.
- Move to a self-sustaining adoption model for providers.
- Embed smart monitoring into commissioning and market-shaping strategies.
- Use cross-provider learning networks.
- Shift delivery expectations onto suppliers, with ICB focusing on governance.
- Expand use of predictive insights for broader care improvements.
- Align funding with "analogue to digital" national strategy.

6. Appendices

The following appendices provide supplementary information and evidence that support the findings presented in this evaluation. They include detailed case studies from participating care providers, quantitative data tables, and supporting materials such as press releases, and feedback templates. These appendices are intended to offer readers additional context, depth and transparency regarding the data sources and insights that informed the evaluation of the Nobi Smart Lamps project in Suffolk.

6.1 Appendix 1 – Case Studies

6.1.1 Eastcotts Residential Nursing Home (full version)

Case Study: Nobi Smart Lamps at Eastcotts Residential Nursing Home

Led by Julie Irving – Health and Social Care Programme Lead, Digital Strategy and Assurance Team
Suffolk and North East Essex Integrated Care Board
In partnership with Suffolk County Council
Technical support provided by Porters Care, the UK distributor for Nobi Smart Lamps

Background

Eastcotts Residential Nursing Home in Haverhill provides dementia and nursing care for 46 residents, including 18–20 with chronic dementia and 5 Discharge to Assess (D2A) rooms.

As part of the Digitising Social Care (DiSC) Programme, 20 Nobi Smart Lamps were installed across residents' bedrooms to detect falls, monitor movement, and support safer night-time care. Together with the home's digital care records system, these innovations have streamlined workflows, enhanced safety, and strengthened relationships with families.

Implementation

- Nobi Smart Lamps were installed in 20 residents' bedrooms to detect falls, monitor movement, and support night-time care.
- Staff quickly integrated the lamps into daily routines, using the Nobi dashboard and app to acknowledge alerts and review incidents.
- Initial training was delivered onsite, and ongoing guidance is provided through refresher sessions and easy-reference cue cards for new or agency staff.
- Despite some minor Wi-Fi issues affecting one lamp, the system is now embedded into everyday practice.
- Eastcotts has also used Nobi recordings to inform clinical decisions and investigations, giving staff ***"much clearer evidence of how things have happened."***

Outcomes and Impact

The introduction of Smart Lamps has had a clear and positive impact on residents' safety and wellbeing, as well as on staff confidence and family reassurance. Over a six-month period, the data demonstrates that the technology has halved the number of falls, with incidents reducing from 21 to 11.

Importantly, the number of residents experiencing multiple falls dropped by 60%, highlighting the effectiveness of early detection and timely staff response. While there have been a small number of ambulance callouts and hospital visits, these reflect the system's ability to alert staff quickly and ensure appropriate care is provided when needed. NB: The data doesn't reflect changes in residents who may be higher risk of falls.

Overall, the results show that Nobi Smart Lamps are contributing to a safer environment, faster response times, and improved outcomes for residents, with staff reporting greater confidence in their ability to prevent harm and support recovery.

Metric	Pre-Smart Lamp Over 6mth	Post-Smart Lamp avg 6 mths	Impact
Falls (number of incidents)	21	11	50% Reduction
Residents with multiple falls	6	2	60% Reduction
Ambulance callouts for falls	0	2	Increase
Hospital visits	0	3	Increase
Hospital admissions	0	1	Increase
Hospital days (length of stay)	0	2	Increase

Figure 1. Impact of Nobi Smart Lamps (Pre vs Post Implementation)

Staff and Family Perspectives

- Staff describe Nobi as ***"amazing"*** — appreciating that it provides reassurance and enables residents to retain privacy and independence.
- Night staff find the system invaluable for early intervention, and managers highlight its contribution to safer care.

"***Nobi is part of the day now – this tech is really useful and increases safety for everyone."***
— Marie, Registered Manager, Eastcotts

- Families consistently describe Nobi as ***"absolutely brilliant,"*** offering peace of mind and reassurance that loved ones are safe.
- One family even chose Eastcotts after seeing the lamps during a visit, a sign of how digital innovation is now enhancing the home's reputation and attracting new residents - ***"The Nobi light gives me peace of mind because mum does fall a lot. I felt guilty about her going into a home, but now I know staff are alerted instantly and can be there straight away."***

Lessons Learned

- Simple cue cards or quick guides help onboard new and agency staff effectively.
- Stable Wi-Fi connectivity is critical to ensure reliable performance.
- Embedding Nobi alerts into monthly falls reporting drives continuous improvement.

Conclusion

Nobi Smart Lamps have become an integral part of life at Eastcotts. They deliver measurable safety benefits, reinforce family confidence, and enhance staff efficiency.

As one visiting professional noted, ***"Nobi has given them much clearer evidence of how things have happened."***

This initiative is part of the Digitising Social Care Programme led by SNEE ICB, with support from Suffolk County Council, and with invaluable input from Gina Trimble, Provider Liaison Manager, whose close collaboration with Eastcotts ensured the successful adoption and sustainability of the technology.

For more information please contact Julie.irving@snee.nhs.uk (Health and Social Care Digital Programme Lead)

6.1.2 Caring Homes Group - Mellish House

Mellish Care Home: Enhancing Resident Safety with Nobi Smart Lamps

Led by Julie Irving – Health and Social Care Programme Lead, Digital Strategy and Assurance Team
Suffolk and North East Essex Integrated Care Board
In partnership with Suffolk County Council
Technical support provided by Porters Care, the UK distributor for Nobi Smart Lamps

Background

Mellish Care Home partnered with the Digital Strategy and Assurance Team (DSA Team) at Suffolk and North East Essex Integrated Care Board (SNEE ICB), with support from Suffolk County Council, to implement Nobi Smart Lamps as part of the Digitising Social Care programme. The lamps were supplied and technically supported by Porters Care, the UK distributor for Nobi. The primary aim was to enhance resident safety through fall detection, faster staff response times, and better analysis of incidents, while maintaining dignity and supporting evidence-based care.

Implementation and Support

Installation and maintenance were delivered by Porters Care, with initial training from Nobi and ongoing support provided by the DSA Team in the form of Gina Trimble, Provider Liaison Manager. Early connectivity issues were quickly resolved, and notification reliability has since improved. Staff have become increasingly comfortable using the system, and confidence has grown as they learn to tailor alert settings to individual residents. Management continues to review data and explore opportunities to integrate insights into wider care routines.

Outcomes and Impact

Analysis of six months of pre- and post-implementation data, combined with staff feedback, highlights both measurable and observational improvements in resident safety following the introduction of the smart lamps.

Metric	Pre-Nobi (Oct 24 – Mar 25)	Post-Nobi (Apr – Oct 25)	Change / Observation
Hospital visits	5	0	100% reduction — no hospital visits recorded post-installation
Hospital admissions	4	0	100% reduction — no hospital admissions post-installation
Hospital days (length of stay)	47	0	47 days pre-Nobi, accounted for by 4 individuals. Since Implementation, no residents have required hospital stays, 100% reduction in both total days and number of individuals admitted.
Ambulance call-outs for falls	6	4	33% reduction
Number of falls	35	58	Increase — attributed to improved detection and recording accuracy
Residents with multiple falls	7	6	Slight reduction, suggesting fewer repeat fallers despite more complete reporting

While the number of recorded falls increased after Nobi installation, staff and management attribute this to the system's ability to capture incidents that previously went undetected, rather than a genuine rise in falls. In particular, the smart lamps identified cases where residents fell and recovered independently, events that would not have been observed or documented before.

Crucially, the data also shows no hospital admissions, hospital stays, or unexplained injuries post-implementation, evidencing safer outcomes and faster intervention when incidents occur. Before the smart lamps were introduced, four residents accounted for a total of 47 hospital days over six months. Since implementation, there have been no hospital admissions or hospital stays, highlighting how earlier alerts and faster staff response have enabled effective in-home management and reduced escalation to secondary care.

Staff report that the smart lamp's insights now help them:
- Understand exactly what happened before, during, and after each fall.
- Carry out more informed post-fall observations.
- Prevent unnecessary safeguarding alerts through accurate evidence.

This richer insight supports better clinical decision-making, improved safeguarding, and stronger reassurance for residents' families.

Resident and Staff Experience

Staff describe the lamps as an increasingly valuable tool:

"Nobi I am really beginning to love. I'm a little obsessed with it now to be honest. Staff are beginning to get the hang of it and I am working with them to use more in-depth entries on accident forms of not only how they were alerted by Nobi but how they analysed a fall on Nobi and what this showed them." — Maekhala, Care Home Manager.

Family members have also expressed appreciation, sharing that knowing the lamps are in place offers peace of mind. While residents themselves often have limited understanding of the technology, staff feedback consistently highlights that the lamps improve awareness, reduces time on the floor, and strengthens overall safety.

Reflections and Next Steps

Mellish Care Home plans to continue using Nobi Smart Lamps and would recommend their use to other providers. The home recognises the benefits of early detection, precise analysis, and improved safeguarding that the lamps deliver. As confidence and familiarity continue to grow, Mellish aims to use the data more proactively to inform care planning and environmental adjustments, supporting a culture of prevention and continuous improvement.

For more information please contact Julie.irving@snee.nhs.uk, Health and Social Care Programme Lead

6.1.3 The Grange (Assisted Living)

Case Study: Transforming Night-Time Care at The Grange with Nobi Smart Lamps

Led by Julie Irving - Health and Social Care Programme Lead Digital Strategy and Assurance Team
Suffolk and North East Essex Integrated Care Board
In partnership with Suffolk County Council
Technical support provided by Porters Care, the UK distributor for Nobi Smart Lamps

Background

The Grange Assisted Living Residential Home in Suffolk provides round-the-clock care for nine residents with learning disabilities, autism, and mental health needs. Each resident is unique — lively, expressive, and supported to live as independently as possible within a warm, structured environment.

As part of the Digitising Social Care Programme, The Grange took part in a pilot led by the Digital Strategy and Assurance Team (DSA Team) at the Suffolk and North East Essex Integrated Care Board (SNEE ICB), with support from Suffolk County Council, to test how smart lamps could enhance safety, wellbeing, and independence in a learning disability setting.

While Nobi lamps had already shown impact in residential and nursing care environments, The Grange became one of the first assisted living homes in the UK to use them.

The home also uses a Digital Social Care Record (DSCR), which complement the lamps by allowing staff to record sleep patterns, health updates, and wellbeing observations digitally.

Implementation and Support

- The installation of the smart lamps at The Grange was a collaborative effort between several key partners, ensuring that the technology was introduced safely, smoothly, and with the needs of residents at the heart of the process.
- Lamps were installed in all 9 rooms, and an additional one installed in the hallway.
- Installation and maintenance were delivered by Porters Care, the UK distributor for Nobi. Their technical expertise and responsive service ensured the lamps were positioned correctly, connected securely, and maintained reliably throughout the rollout. Suffolk County Council provided the expertise to enable grant agreements to be set up enabling smooth transition of funds for the project.
- Training was provided directly by Nobi, who equipped The Grange's care team with the knowledge and confidence to use the system effectively, from understanding alerts and interpreting sleep reports to supporting residents in a respectful, non-intrusive way.
- Ongoing implementation support was led by the DSA Team at SNEE ICB, with additional guidance from Gina Trimble, Provider Liaison Manager, DSA Team, who worked closely with The Grange team throughout the project. Gina provided practical, hands-on help, visiting the home, gathering feedback, and ensuring the system worked seamlessly for both residents and staff. Gina maintains that relationship to this day.

> ***"Gina has been wonderful – she took the time to understand our home, listen to our feedback, and make sure everything worked for our residents. She's been there from day one."***
> — Lica Brace, Manager, The Grange

- Early technical challenges, such as Wi-Fi connectivity and lamp positioning, were quickly resolved thanks to the collaborative working between The Grange, Porters Care, and Gina from the DSA Team. By February 2025, the system was fully live, and staff were confident in using the lamps as part of their nightly routines.

The Impact of Smart Lamps

Smart lamps have revolutionised night-time care at The Grange by allowing staff to deliver safer, more personalised, and less intrusive support to residents.

1. Empowering Safer, More Informed Night-Time Care
The lamps' AI-driven monitoring enables staff to see when residents are up, moving, or potentially at risk without disturbing them. Alerts are raised for unusual activity or falls, allowing rapid, calm response.

2. Supporting Mental Health and Self-Harm Prevention
For residents with self-harming behaviours or auditory hallucinations, staff can identify sleep disruptions and provide early reassurance or distraction. Sleep reports also support GP and mental health reviews.

3. Helping Residents Settle and Stay Independent
A new resident with a history of absconding was monitored discreetly, allowing her to settle faster and gain confidence without constant door checks.

4. Monitoring Epilepsy and Detecting Health Changes
For residents with epilepsy, smart lamps highlight patterns that may suggest seizures or illness. It also supports early detection of conditions like urinary tract infections based on sleep and activity data.

Staff Experience and Cultural Change

Smart lamps have transformed how The Grange's team manages night-time care. Staff describe the system as non-intrusive, confidence-building, and empowering. Alerts are centralised on one mobile device, reducing disruption and ensuring smooth communication.

Staff now use data from the smart lamps to inform morning handovers and complement digital care notes recorded through the DSCR. The system saves time, improves sleep quality for residents, and allows staff to focus more on engagement and wellbeing.

Family and Resident Reassurance

Families express peace of mind knowing that their loved ones are monitored safely and respectfully. The system allows for privacy and dignity while providing an invisible layer of protection.

As one resident said: ***"It stops me from falling and it keeps me safe."***

Learning and Reflections

The Grange's experience has highlighted key lessons:

- Partnership drives success: collaboration between SNEE ICB team, Porters Care, and Suffolk County Council, has been vital.
- Privacy matters: residents prefer the stick-figure view to maintain dignity.
- Data empowers action: insights from the lamps inform GP consultations and medication reviews.
- Ongoing support is key: Gina Trimble and the DSA Team continue to help staff use the system effectively.

Conclusion

The smart lamps have transformed care at The Grange, enhancing safety, dignity, and independence. The technology has supported staff in providing proactive, person-centred care while reassuring residents and families alike. This initiative, led by the DSA Team at SNEE ICB demonstrates how innovation and collaboration can drive meaningful change in social care.

"We are really pleased to have been offered this AI system – it has proven to be a godsend for everyone here at The Grange and for all of our residents' families."
— The Grange Team

For more information please contact Julie.irving@snee.nhs.uk (Health and Social Care Digital Programme Lead)

6.2 Societal Benefits

Societal Benefits are the positive effects of the implementation of the Nobi Smart Lamps on people and communities, not just the care settings' budget and internal processes. These look beyond whether a saving has been made and asks the question, 'Does this make life better for people, families and communities'. Below is a list of societal benefits that over time could be given a degree of testing to contribute to measurable benefits realisation.

Residents experience a much greater sense of safety because falls are detected automatically and staff respond quickly

Older people can retain more independence, especially at night, with smart lighting and proactive monitoring reducing the need for intrusive checks.

Families gain peace of mind knowing that if a loved one falls, the system will alert staff instantly, even if the person cannot call for help

Reduced falls and faster responses lower the risk of serious injury, helping residents maintain mobility, function and quality of life for longer.

Residents experience fewer night-time disturbances because routine surveillance rounds can be reduced, supporting better sleep and wellbeing.

Staff can spend more time on compassionate, relational care rather than constant monitoring, which improves the social and emotional atmosphere of the home.

Higher staff morale and reduced stress around night shifts and high-risk residents contribute to a more stable, confident workforce for residents and families.

Enhanced dignity, as discreet ceiling lights avoid stigmatising wearables and preserve privacy by using abstracted images instead of full video.

The care home's reputation for safety and innovation improves, which can increase public trust and community confidence in residential care.

By reducing avoidable falls and hospital transfers, Nobi supports a more sustainable health and care system, benefiting taxpayers and freeing NHS capacity for others.

6.3 Appendix 2 – Quantitative Data Tables

6.3.1 Baseline questionnaire surveys


Pre Nobi lights 6 months Benefits Basel


Fornham House baseline survey Octob


Handford House Baseline Survey Octob

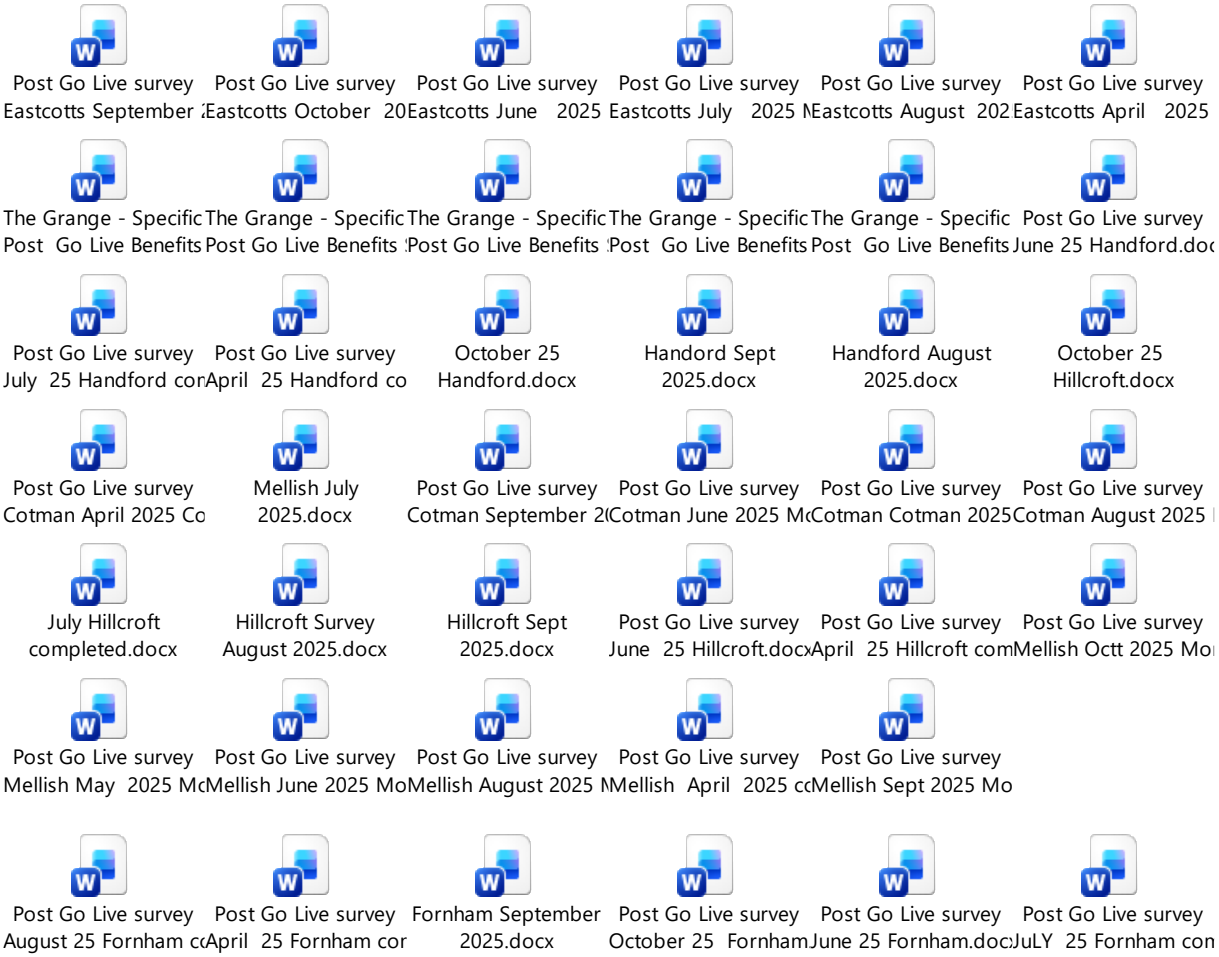

Hillcroft House Baseline Survey Octob


The Grange - Specific Benefits Baselining Su


Cotman Benefits Baselining Survey Oct


Mellish Benefits Baselining Survey Oct

6.3.2 Monthly post go-live surveys (provider returns)



6.3.3 Summary intervention and closure time charts


Copy of Fall Escalations Suffolk for


Copy of Fall Escalations Suffolk for


Fall Escalations Suffolk for May.xlsx


Fall Escalations Suffolk for June.xlsx

6.4 Appendix – Supporting Materials

6.4.1 Communications, Social Media Posts for 'Walk a Mile in Their Shoes' series, infographics etc.

Press Release

Digital innovation and heartfelt care come together at Eastcotts Nursing Home
Part of Suffolk and North East Essex ICB's 'Walk a Mile in Their Shoes' initiative

Date: 3 September 2025

Issued by: NHS Suffolk and North East Essex Integrated Care Board (ICB)

Frontline insight meets digital innovation

Eastcotts Residential Nursing Home in Haverhill recently welcomed Gina Trimble, Provider Liaison Manager at NHS Suffolk and North East Essex Integrated Care Board (ICB), as part of the ICB's Walk a Mile in Their Shoes programme, an initiative designed to deepen understanding of frontline care by spending time alongside staff, residents, and families.

On 3 September 2025, Gina joined the Eastcotts team to experience how digital tools are transforming care for residents living with dementia. The home, which supports 46 residents, has fully embedded the Digital Social Care Record (DSCR) and Smart Lamps to enhance safety, streamline workflows, and strengthen relationships with families.

Moments of connection

Home Manager Marie Smale said:

"It was an absolute pleasure having Gina with us. She spent time with our staff, residents, relatives, and visitors, really listening to their experiences of living and working at Eastcotts.

One particularly special moment was when she engaged with a resident who often spends his days walking with purpose around the home. Gina connected with him through his love of trains, sparked by a book he had on the table. It was the most engaged we've ever seen him, a really special moment."

Technology supporting compassionate care

The visit also provided an opportunity to explore how technology is supporting compassionate, personalised care. Staff and relatives shared how the Smart Lamps alert teams instantly to any falls, helping staff to respond quickly and provide evidence to relatives and emergency services when needed.

"People were really impressed with how quickly staff can attend to alerts and the reassurance that provides," added Marie. "The technology complements the human touch, it doesn't replace it."

At Eastcotts, the DSCR has replaced paper notes with real-time digital updates recorded on smartphones, giving managers instant oversight and improving continuity of care. Staff report feeling more confident and supported in their roles, with one senior carer describing how the system has made handovers quicker and freed up more time to spend with residents.

Supporting a digital-first care culture

Gina said:

"The Eastcotts team have created a truly person-centred environment where digital tools support, rather than replace, human care. It was inspiring to see technology being used so naturally by staff to enhance dignity, safety, and connection for residents living with dementia."

The Walk a Mile in Their Shoes programme is unique to Suffolk and north east Essex, making the ICB the first in the country to adopt this hands-on approach to understanding care. Each visit brings new insight into how digital innovation can make a tangible difference to residents, families, and staff.

Marie concluded:

"Well done, Gina, and thank you for your time. You're welcome back anytime."

This is the second in a series of stories. In the coming months, the ICB will share more of Gina's stories from the frontline, showing how digital care innovations are making a real difference for the people receiving care.

Georgina Trimble • 1st
Leading Strategy,Driving Innovation, Making a ...
3d •

Walking the Digital Mile: Implementing Digital Social Care Records in Suffolk and North East Essex explores how one of the most forward-thinking Integrated Care Boards in England has transformed the way health and social care information is captured, shared, and used. In this article, Duncan Stroud, Deputy Head of Communications and Engagement for NHS England's East of England region, highlights the collaborative journey taken by Suffolk and North East Essex ICB as it embraced Digital Social Care Records (DSCR).

Walking the digital mile: implementing digital social care records in Suffolk and North East Essex

NHS Suffolk and North East Essex Integ...
2,577 followers
1mo •

Eastcotts Residential Nursing Home in Haverhill recently welcomed Gina Trimble, the ICB's Provider Liaison Manager, as part of the ICB's Walk a Mile in Their Shoes programme.

This initiative aims to deepen understanding of frontline care by spending time alongside staff, residents, and families.

Gina joined the Eastcotts team to experience how digital tools are transforming care for residents living with dementia. The home, which supports 46 residents, has fully embedded the Digital Social Care Record (DSCR) and Smart Lamps to enhance safety, streamline workflows, and strengthen relationships with families.

Gina says: "The Eastcotts team has created a truly person-centred environment where digital tools support, rather than replace, human care. It was inspiring to see technology being used so naturally by staff to enhance dignity, safety, and connection for residents living with dementia."

Rethink Partners + Follow ···
620 followers
5h •

We spent the morning filming with Julie Irving and Georgina T. from NHS Suffolk and North East Essex Integrated Care Board , capturing their work with Porters Care Limited to introduce Nobi Smart Lights into residential homes across Suffolk.

The project really shows how the right technology in the right setting for the right person can really have an impact. The use of NOBI in these residential settings has supported carers to respond quickly, reduce long lies and understand when someone needs medical attention.

Even at the six-month point, the results from this three year programme are already striking and demonstrate the value of thoughtful implementation in real care settings.

6

NHS Suffolk and North East Essex Integ...
2,577 followers
2mo •

Gina Trimble, Provider Liaison Manager at NHS Suffolk and North East Essex ICB, is going onto the front line of social care to see how digital tools are improving care for residents, supporting families, and helping staff deliver safer, more personalised care

Gina is spending time working shifts across a range of care settings, including care homes, domiciliary care, supported living, and extra care housing, to experience first-hand how care is delivered in the digital age.

The initiative, described as 'walking a mile in their shoes', is unique to Suffolk and north east Essex, making it the only ICB in the country to adopt this hands-on approach.

The programme aims to:
• Improve the experience of residents by seeing how digital tools help care staff deliver safer, more personalised support
• Strengthen links between the ICB and local care providers
• Show the real impact of Digital Social Care Records (DSCR) and smart lamps, which combines optical care sensors and artificial intelligence, on daily care and outcomes
• Shape ICB support so providers can use digital innovations to benefit residents
• Celebrate the dedication and expertise of the local care workforce

Gina (pictured) says: "Digital tools only work if they improve life for residents. By working alongside care staff, I can see how digital care records and smart lamps are helping people, understand ongoing challenges, and explore ways to make care safer, more personalised, and more responsive to their needs."

Gina (pictured) says: "Digital tools only work if they improve life for residents. By working alongside care staff, I can see how digital care records and smart lamps are helping people, understand ongoing challenges, and explore ways to make care safer, more personalised, and more responsive to their needs."

In the coming months we'll share Gina's stories from the frontline, showing how digital care innovations are making a real difference for the people receiving care..

6.4.2 Regional, National press release, internal communications for project

Walking the digital mile - EoE article Nov